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Date of Service: 10-03-2019

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EXAM: ULTRASOUND THYROID

HISTORY: Hyperparathyroidism

History of FNA or ethanol ablation: None known.

TECHNIQUE: Realtime sonographic imaging was performed of the thyroid gland assessing grayscale and color Doppler flow appearance using a high frequency linear transducer.

COMPARISON: None available.

FINDINGS:

The right lobe measures 5.7 cm.

The left lobe measures 4.5 cm.

The isthmus measures 0.2 cm.

Overall thyroid parenchyma demonstrates normal echotexture and vascularity.

Nodules:

No discrete thyroid nodule

Survey images of the neck demonstrate benign-appearing 2.4 cm lymph node on the left at level 3 with normal morphology

IMPRESSION:

1. No discrete thyroid nodule

TI-RADS CATEGORY: TR1

American College of Radiology TI-RADS Categories and Recommendations (2017):

TR1: 0 points, *Benign*, No FNA

TR2: 2 points, *Not suspicious*, No FNA

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TR3: 3 points, *Mildly suspicious*, FNA if 2.5 cm+, Follow if 1.5 cm+

TR4: 4-6 points, *Moderately Suspicious*, FNA if 1.5 cm+, Follow if 1 cm+

TR5: 7+ points, *Highly Suspicious*, FNA if 1 cm+, Follow if 0.5 cm+

Follow-up ultrasound guidelines:

TR5: yearly for 5 years, if no growth or change in TI-RADS level

TR4: at 1, 2, 3 and 5 years, if no growth or change in TI-RADS level

TR3: at 1, 3 and 5 years, if no growth or change in TI-RADS level

If change but below threshold for FNA, repeat in one year.

Source: ACR Thyroid Imaging, Reporting and Data System (TI-RADS): White Paper of the ACR TI-RADS Committee. Tesler et al., J Am Coll Radiol 2017;14:587-595.

End of diagnostic report for accession: 20620828

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Confidential

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